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| 2  | ATPAIR A           | DDI IOATION   | PPP DESCRIPTION          |               |
|----|--------------------|---------------|--------------------------|---------------|
| ν. | 4 I I N I <i>E</i> | MINIAL REPORT | FFF DETEDMINATION        | DECABA        |
|    | ~! -!!! /          |               | <b>FEE DETERMINATION</b> | <b>NECOKD</b> |

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |   |   |           |   |                  |            | Application or Docket Number |                        |    |                    |                      |
|---|---|---|-----------|---|------------------|------------|------------------------------|------------------------|----|--------------------|----------------------|
|   |   | CLAIMS AS                                     | S FILED   |   | olumn 2)         | •          | SMALL                        | ENTITY                 | OR | OTHE<br>SMALL      | R THAN<br>ENTITY     |
|   | FOR   | NUME  | BER FILED | NUMB  | ER EXTRA         |            | RATE                         | FEE                    |    | RATE               | 555                  |
|   | SIC FEE<br>CFR 1.16(a))   |   |           | <u> </u>                                    |                  |            |                              | \$                     |    | 70.11              | FEE                  |
| TO  | TAL CLAIMS  |   |           |   |                  |            |                              |                        | OR | <del></del>        |                      |
| (37 CFR 1.16(c)) INDEPENDENT CLAIMS                                     |   | MS  | minus 2   | 0 =   •                                     |                  | ĺ          | × \$=                        | ļ                      | OR | X \$=              | ļ                    |
| (37 CFR 1.16(b))  |   | <u>,                                     </u> | minus     | 3 = '                                       |                  |            | x \$=                        |                        | OR | × \$=              |                      |
| MUI   | LTIPLE DEPENDE  | NT CLAIM PRESE                                | NT (      | (37 CFR 1.16(d))                            |                  |            | + \$=                        | -                      | OR | + \$=              |                      |
| • If (  | he difference in  | solumn 1 is less th                           |           | nter "0" in column                          | 2.               |            | TOTAL                        |                        | OR | TOTAL              |                      |
|   | ,   | LAIMS AS AM                                   | ENDED     | – PARTII                                    | BEST AV          | Δ          | II ABI F                     | COPY                   | 1  |                    |                      |
|   |   | (Column 1)                                    | ٠٠.,      | (Column 2)                                  | (Column 3)       | <i>,</i> v | SMALL E                      |                        | OR |                    | R THAN<br>ENTITY     |
| NT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT     |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |            | RATE                         | ADDI-<br>TIONAL<br>FEE |    | RATE               | ADDI<br>TIONA<br>FEE |
| M   | Total<br>(37 CFR 1.16(c))                                       | ·   | Minus     | ••  | =                |            | x \$ =                       |                        | OR | × \$ =             |                      |
| <b>AMENDMENT</b>  | Independent<br>(37 CFR 1.16(b))                                 | •   | Minus     | •••   | Ξ                |            | x \$ =                       |                        | OR | x \$ =             |                      |
| AM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |   |           |   |                  |            | + \$ =                       | -                      | OR | + s =              |                      |
|   |   |   |           |   |                  | L          | TOTAL<br>ADD'L FEE           |                        | OR | TOTAL<br>ADD'L FEE |                      |
|   |   | (Column 1)                                    |           | (Column 2)                                  | (Column 3)       |            |                              |                        |    |                    |                      |
| ENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT     |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT EXTRA    |            | RATE                         | ADDI-<br>TIONAL<br>FEE |    | RATE               | ADDI<br>TIONA<br>FEE |
| ~ 1   | Total<br>(37 CFR 1.16(c))                                       | 29  | Minus     | " 29  | =                |            | x \$=                        |                        | OR | :                  |                      |
| AMENDA  | Independent<br>(37 CFR 1.16(b))                                 | 2   | Minus     | <sup></sup> 5                               | =                |            | × \$ =                       |                        | OR | x \$=              |                      |
| ₹   | FIRST PRESENT   | ATION OF MULTIPLE                             | E DEPENDE | ENT CLAIM (37 CF                            | R 1.16(d))       |            | + \$ =                       |                        | OR | +\$ =              |                      |
|   | -   |   |           | <del></del>                                 |                  |            | TOTAL<br>ADD'L FEE           |                        | OR | TOTAL<br>ADD'L FEE |                      |
|   |   | (Column 1)                                    |           | fi<br>(Column 2)                            | (Column 3)       |            | · •                          |                        |    |                    |                      |
| )<br> -   |   | CLAIMS<br>REMAINING<br>AFTER                  |           | HIGHEST<br>NUMBER<br>PREVIOUSLY             | PRESENT<br>EXTRA |            | RATE                         | ADDI-<br>TIONAL        |    | RATE               | ADDI<br>TIONA        |

| ENTC      |   | REMAINING<br>AFTER<br>AMENDMENT |       | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |  |  |
|-----------|---|---------------------------------|-------|----------------------------------|------------------|--|--|
| AMENDMENT | Total<br>(37 CFR 1.16(c))                                       | •                               | Minus | ••                               | =                |  |  |
| IEN       | Independent<br>(37 CFR 1.16(b))                                 | •                               | Minus | •••                              | =                |  |  |
| AN        | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |                                 |       |                                  |                  |  |  |

| RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|
| × \$ =             |                        |
| × \$ =             |                        |
| + \$=              |                        |
| TOTAL<br>ADO'L FEE |                        |

|   | RATE               | ADDI<br>TIONA<br>FEE |
|---|--------------------|----------------------|
|   | × \$ =             |                      |
|   | x_\$= .            |                      |
|   | + \$=              |                      |
| • | TOTAL<br>ADD'L FEE |                      |

OR

OR

OR

OR

<sup>•</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.